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## BIB DATA SHEET

CONFIRMATION NO. 7588

<b>SERIAL NUMBER</b> 10/808,810	<b>FILING or 371(c) DATE</b> 03/25/2004 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3626	<b>ATTORNEY DOCKET NO.</b> R135 1010.2		
<b>APPLICANTS</b> Lewis Howard Wizig, Leawood, KS; <b>** CONTINUING DATA *****</b> This application is a CON of 09/434,271 11/04/1999 PAT 6,735,569 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/07/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/RACHELL L PORTER/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> KS	<b>SHEETS DRAWINGS</b> 66	<b>TOTAL CLAIMS</b> 1	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> WOMBLE CARLYLE SANDRIDGE & RICE, PLLC ATTN: PATENT DOCKETING P.O. BOX 7037 ATLANTA, GA 30357-0037 UNITED STATES						
<b>TITLE</b> Method and system for providing a user-selected healthcare services package and healthcare services panel customized based on a user's selections						
<b>FILING FEE RECEIVED</b> 1756	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			